

Work Order ID 90233

90233

Page 1

September 13, 2012 7:15:20 AM

Item ID: D3996-FE-832-EF Accept *N900040100* Setup Start *NS1*
Revision ID: Stop *NS2*
Item Name: Self-Clinching Fastener
Start Date: 9/13/12 Start Qty: 500.00 *500* Cust Item ID:
Required Date: 9/19/12 Req'd Qty: 500.00 *500* Customer:
Reference:

Approvals: Process Plan: CZ Date: 12/09/13 Tooling: Date: Run Start *NR1*
QC: Date: SPC (Y/N): Date: Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Lot ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3996	A

100 0.00

100

Purchasing

Purchasing

Memo

Issue P/O: 17899
Purchase Part Number: FE-832-EF
Supplier: Interfast Inc.
Certificate of conformity is required

0.00

CZ 12/09/13 500

110 Receive & Inspect for Damage & Mat'l Certs 0.00

110

Packaging

Packaging

Memo

0.00

12/4/17 (500)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY										
Landing Gear			General							
<input type="checkbox"/> Bending	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Cracks	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Wave/Twist in Tube
<input type="checkbox"/> Bend	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Burrs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Countersink	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Folio
<input type="checkbox"/> Grain	<input type="checkbox"/> Hardware	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Misread	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Weld	<input type="checkbox"/> Wrong Stock Pulled

Work Order ID 90233***90233***

Page 2

September 13, 2012 7:15:20 AM

Item ID: D3996-FE-832-EF

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Self-Clinching Fastener

Start Date: 9/13/12 Start Qty: 500.00

500

Cust Item ID:

Required Date: 9/19/12 Req'd Qty: 500.00

500

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC6- Inspect dimensions to drawing	0.00							
120									
QC	Memo	0.00							
Quality Control									
130	Identify as per dwg & Stock Location: <u>GA</u>	0.00							
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

12/9/18
12-0918

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
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Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear			General																								
<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced																		
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure																		
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld																		
<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled																		
<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>																			
<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	Other																		
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge																				
<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset																						
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration																						
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence																						
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions																						

Picklist Print

September 13, 2012 7:15:20 AM

Page 1

Work Order ID: 90233

Parent Item: D3996-FE-832-EF

Start Date: 9/13/12

Required Date: 9/19/12

Parent Item Name: Self-Clinching Fastener

Start Qty: 500.00

Required Qty: 500.00

Comments: IPP RevA: new issue 09.11.11 DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
FE-832-EF PEM Insert		Purchased	No			110	Each	0.0000	1	500		9/13/12	500

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

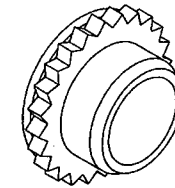
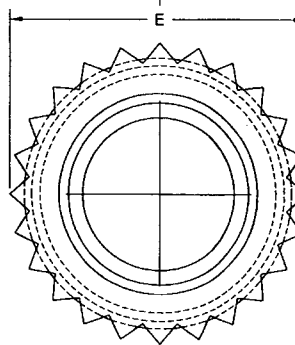
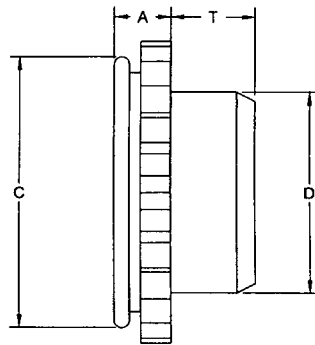
Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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SPECIFICATION CONTROL DRAWING



D3996-XXX-YYY-ZZZ SELF-CLINCHING FASTENER

THREAD SIZE	THREAD CODE ("YYY")	TYPE ("XXX")	A MAX (SHANK)	SHEET THICKNESS	C +0.000 -0.005	D MAX	E ±0.005	T +0.015 -0.000	HOLE SIZE IN SHEET +0.003/-0.000	MIN DIST. HOLE CL TO EDGE	WEIGHT lb
#4-40 (0.112)	440	FEO	0.040	0.039-0.045	0.171	0.145	0.192	0.065	0.172	0.14	0.00031
		FE	0.060	0.059-0.070							0.00037
#6-32 (0.138)	632	FEO	0.040	0.039-0.045	0.212	0.180	0.244	0.075	0.213	0.17	0.00047
		FE	0.060	0.059-0.070							0.00068
#8-32 (0.164)	832	FEO	0.040	0.039-0.045	0.289	0.215	0.322	0.090	0.290	0.20	0.00098
		FE	0.060	0.059-0.070							0.00124
#10-32 (0.190)	032	FEO	0.040	0.039-0.045	0.289	0.245	0.322	0.110	0.290	0.20	0.00104
		FE	0.060	0.059-0.070							0.00120
1/4-28	0428	FE	0.060	0.059-0.070	0.343	0.318	0.384	0.120	0.344	0.28	0.00158

NOTES

1) SPECIFICATION: PENNENGINEERING (PEM) MINIATURE SELF-CLINCHING FASTENER, SELF-LOCKING
PEM P/N XXX-YYY-ZZZ

WHERE "XXX" = TYPE "FEO" (SHORT SHANK) OR "FE" (LONG SHANK) PER TABLE
"YYY" = THREAD CODE PER TABLE
"ZZZ" = FINISH CODE PER NOTE 2 BELOW

FOR EXAMPLE, #8-32 THREAD, LONG SHANK, ELECTRO-FILM FINISH:
DART P/N = D3996-FE-832-EF
PEM P/N = FE-832-EF

2) FINISH: FINISH CODE ("ZZZ") PER THE FOLLOWING:

"C" = CADMIUM YELLOW CHROMATE PER ASTM B766 CLASS 5 TYPE II
"CI" = CADMIUM CLEAR CHROMATE PER ASTM B766 CLASS 5, TYPE III
"EF" = ELECTRO-FILM PER MIL-PRF-46010
"MD" = MOLYBDENUM DISULFIDE DRY FILM (STD PEM FINISH)

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: N/A

6) IDENTIFICATION: N/A

7) WEIGHT: N/A

CL 12/09/13
W10.90233

RELEASED
2009-11-08

A	NEW ISSUE	CP	09.10.01
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	09.10.01		

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D3996	REV. A
TITLE SELF-CLINCHING FASTENER	SCALE NTS
SHEET 1 OF 1	

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WRITTEN PERMISSION FROM DART AEROSPACE LTD

Chantal Lavoie

From: Marc Bellavance. <mbellavance@dartaero.com>
Sent: September 13, 2012 3:09 PM
To: 'Chantal Lavoie'; 'Chris Provencal'
Cc: 'Lacelle, Linda'; Shepherd, David
Subject: RE: Confirmation of Quote # 992001 Your Ref#:PO17899
Attachments: D3996-RevA.PDF; fedata.pdf

Chantal,

As per our drawing and PennEngineering's spec, the "EF" in "FE-832-EF" refers to the finish on the self-clinching fastener. Per attached PennEngineering Bulletin, the "EF" (Electro-Film) is no longer offered. Only "none", "MD" (Black Dry Film Lubricant), and "CW" (Passivated with Clear Dry Film Lubricant) are available finish options. Therefore, if "FE-832-MD" is dimensionally identical in shape and form to "FE-832-EF", then the substitution would be acceptable.



Marc Bellavance

Technical/Shop Support

T. 613-632-5200 | C. 613-676-0992 | F. 613-632-9311

1270 Aberdeen Street, Hawkesbury, Ontario, Canada, K6A 2K7



Product Documentation: Verify Revision Status/Download [HERE!](#)

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Please consider your environmental responsibility before printing this e-mail.

From: Chantal Lavoie [<mailto:clavoie@dartaero.com>]
Sent: Thursday, September 13, 2012 1:37 PM
To: Chris Provencal; Marc Bellavance
Cc: Lacelle, Linda
Subject: FW: Confirmation of Quote # 992001 Your Ref#:PO17899

Hi Marc,

Just checking is item FE-832-MD the same as FE-832-EF, and would it be acceptable. Please see dwg.

Thanks

Chantal

From: jerryarsenault@interfast.ca [<mailto:jerryarsenault@interfast.ca>]
Sent: September 13, 2012 1:08 PM
To: clavoie@dartaero.com
Subject: Confirmation of Quote # 992001 Your Ref#:PO17899



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO17899

Purchase Order Date 9/13/12

PO Print Date 9/14/12

Page Number 1 of 1

Order From :

VC-INT001

INTERFAST INC.
6360 COTE DE LIESSE
MONTREAL, QC H4T 1E3
CA

Contact Name

Vendor Phone 5147385959

Vendor Fax 5147386363

Vendor Account Nbr 110900

Buyer

Chantal Lavoie

Requisition Nbr

10127-2607

Tax Resale Nbr

Net 30

Terms

CAD

Currency

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

REUSE

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	FE-832-EF	PEM Insert	9/18/12 Yes	500.00 Each	FedEx PI collect	\$0.3000	\$150.00

Special Inst: AS PER DWG D3996 REV. A
B90233

PO Total:

\$150.00

CL

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - YES NO

Change Nbr: 2

Change Date: 9/14/12



22 WORCESTER ROAD, TORONTO, ON, CAN, M9W 5X2
TEL: 1-416-674-0770 FAX: 1-416-674-5804
WEBSITE: www.interfast.ca

Packing Slip

PACK-SLIP REV: NC DATE: 09/30/03



Invoice#:

730791

14-SEP-12

SV DART AEROSPACE LIMITED
OE 1270 ABERDEEN ST.
LN HAWKESBURY ON
DD K6A 1K7
U CAN
A

SE DART AEROSPACE LIMITED
HX 1270 ABERDEEN ST.
IP HAWKESBURY ON
PE CAN K6A 1K7
D
TI
OR
A

SHIP MODE: Purolator
MODE D'EXPEDITION:
FOB: FOB - Interfast Dock
F.A.B.:
NO. CARTONS: 1
WAYBILL #: NAE100007217
FACTURE DE VOIE #:

CUSTOMER PO#
PO17899
CUSTOMER #
CLIENT #
OUR SALE # 613794
N° DE LA VENTE
TERMS
MODALITES: Net 30 Days (01)

QUANTITY ORDERED QUANTITE COMMANDEE	U/M M.N.R	QUANTITY SHIPPED QUANTITE EXPEDIEE	BALANCE DUE SOLDE	PART# & DESCRIPTION PARTIE # ET DESCRIPTION	LOT# / Serial#
500.00	EA	500.00	0.00	Cust PO Line#: Cust Part#: FE-832-EF Part#: FE-832-MD Description: NUT Pack box#: PACK610887 Lot Line#: 1 Qty: 500 Expire Date Country Of Origin: USA	D927743
Harmonized code: 7318.16.00.90					

Total Qty Shipped: 500

GST/TPS # R102504958 QPST/TVQ #1009982431TQ0001

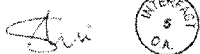
PAST DUE ACCOUNTS WILL BE SUBJECT TO A SERVICE CHARGE OF 1.5% PER MONTH. INTERFAST WILL BE RESPONSIBLE FOR THE AUTHORIZED REPLACEMENT OF GOODS WHICH ARE DEFECTIVE OR WHICH ARE NOT TO SPECIFICATION PROVIDED THAT CLAIMS ARE MADE WITHIN 14 DAYS OF SHIPMENT.

LES COMPTES EN SOUFFRANCE SERONT ASSUJETTIS À DES FRAIS DE SERVICE DE 1.5% PAR MOIS. INTERFAST NE SERA RESPONSABLE QUE POUR L'ÉCHANGE AUTORISÉ DE BIENS DÉFECTUEUX OU QUI NE SONT PAS CONFORMES AUX SPÉCIFICATIONS À CONDITION QUE LES RÉCLAMATIONS SOIENT EFFECTUÉES DANS LES QUATORZE (14) JOURS SUIVANT L'EXPÉDITION.

"I hereby certify that the items, or materials covered by this document have been inspected and tested and conform to all applicable specifications relative thereto, and unless authorized by customers, no work or alterations have been performed. Supportive documentary evidence of conformance is either on file or available upon request."

"Je certifie par les présentes que les articles ou matériaux couverts par le présent document ont été inspectés et testés, et qu'ils sont conformes à toutes les spécifications applicables en ce qui a trait auxdits articles ou matériaux. À moins d'avoir obtenu l'autorisation du client, aucun remaniement ni aucune modification n'ont été apportés. La documentation de soutien prouvant la conformité se trouve dans le dossier ou est disponible sur demande."

Sunita Kharbanda



Quality System
Administrator

I hereby certify that the Aircraft Parts, Appliances and or materials described hereon were acquired from a source of supply that is consistent with the conditions under which the department of Transport Distributor approval No.178-94 has been granted certified by: